

# BEST AVAILABLE COPY

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>	10381	
O.I.P.E. CLASSIFIER	<i>[Signature]</i>	34	10/21
FORMALITY REVIEW		1186	10/28-99

## INDEX OF CLAIMS

✓ ..... Rejected  
 - ..... Allowed  
 (Through numeral) Canceled  
 - ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final	
Original	
1	3/0
2	11/0
3	5/02
4	2/03
5	9/03
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Claim	Date
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